

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective June 1, 2005

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto	0	+0.3%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

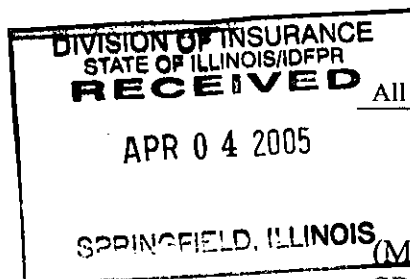
na

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Deleting Company Exception to Rule 24.E.2.M and adopting ISO's State Rule 24.3.2.m

\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will result from application of new rates.

All America Insurance Company  
Name of Company(Mrs.) Petrise Meyer  
SR Rates & Forms Analyst  
Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate  
revision effective November 1, 2005.

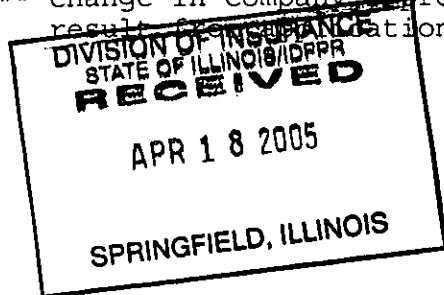
(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or - )**</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto	3,491	-9.9
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain  
classes?: If so, specify: No

Brief description of filing. (If filing follows rates of an advisory  
organization, specify organization): Adopt ISO's revised loss costs

\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will  
result from implementation of new rates.



AXA Corporate Solutions Ins. Co.  
Name of Company

W. J. Jones Sr. Vice Pres.  
Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate  
revision effective NB: 04/11/05 Ren: 05/17/05.

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto	\$ 1,247,238	-0.5%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other _____		
Line of Insurance		

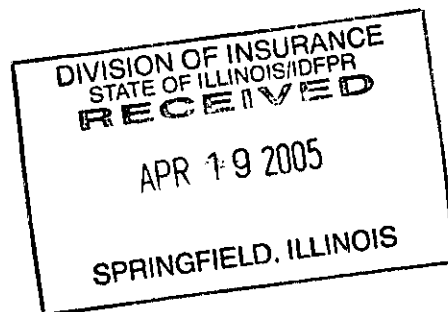
Does filing only apply to certain territory (territories) or certain classes? If so,  
specify: No

Brief description of filing. (If filing following rates of an advisory organization,  
specify organization): Rate and Rule Revision, changes listed on coverletter.

\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will result from application of new rates.

Auto-Owners Insurance Company  
Name of Company



Emily Schmit, Administrator  
Commercial Prop. & Liab. Actuarial  
Official - Title

30004 (6-77)

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective June 1, 2005

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto	\$335,363	+0.3%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

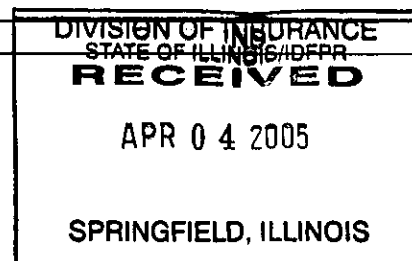
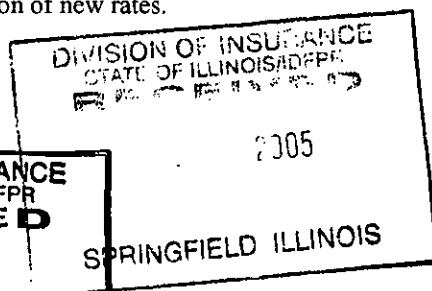
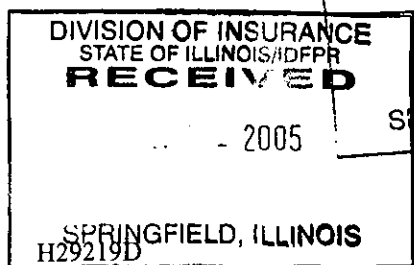
na

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Deleting Company Exception to Rule 24.E.2.M and adopting ISO's State Rule 24.3.2.m

\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will result from application of new rates.

Central Mutual Insurance Company  
Name of Company(Mrs.) Petrise Meyer  
SR Rates & Forms Analyst  
Official - Title

# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 11/1/2005

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto	67,102	-10.10%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: \_\_\_\_\_

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): \_\_\_\_\_

adoption of ISO filing designation GL-2005-BGL1

\*Adjusted to reflect all prior rate changes.

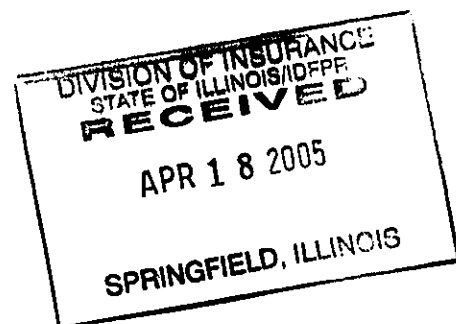
\*\*Change in Company's premium level which will result from application of new rates.

Crum & Forster Indemnity Company

Name of Company

Ruth A. Overholser, Regulatory Compliance Analyst

Official - Title



# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 06/01/05 New and Renewal Business

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto	\$1,452,917	+0.2%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other _____		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Filing of various rule/rate revisions for our Commercial General Liability Program

\*Adjusted to reflect all prior rate changes.

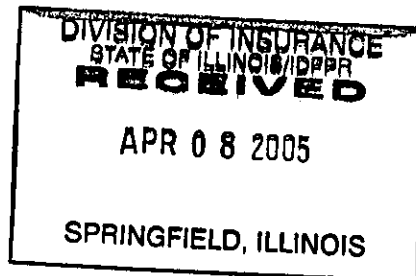
\*\*Change in Company's premium level which will result from application of new rates.

Empire Fire and Marine Insurance Company

Name of Company

Diane M. Zaborowski - Product Analyst

Official - Title

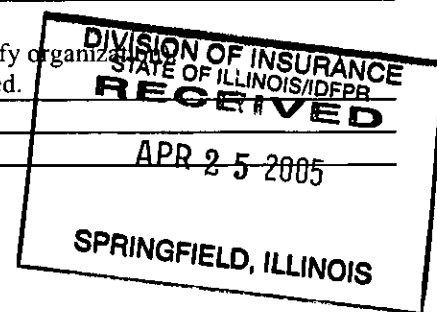


## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 11/01/05

	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto	24,117	-9.9%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

NoBrief description of filing. (If filing follows rates of an advisory organization, specify organization.)  
Adoption of ISO loss cost filing GL-2005-BGL1. Harco's LCM will remain as filed.

\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will result from application of new rates.

Harco National Insurance Company  
Name of CompanyDebbie Smith-Compliance Spec.  
Official - Title

§ 754. Exhibit A Summary sheet (Form RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 8/15/2005

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private		
Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto	72,663.00	-13.2%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Life of Insurance		

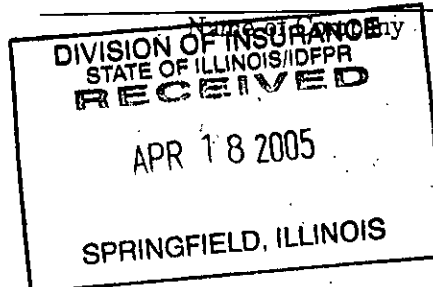
Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Brief description of filing (If filing follows rates of an advisory organization, specify organization): Independent filing to adjust mono line rates and AND CHANGE  
division six genr liab. contractors mod factor

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

Iowa American Insurance Company





§ 754. Exhibit A Summary sheet (Form RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 8/15/05

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private		
Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto	869,779.	-13.2%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Life of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

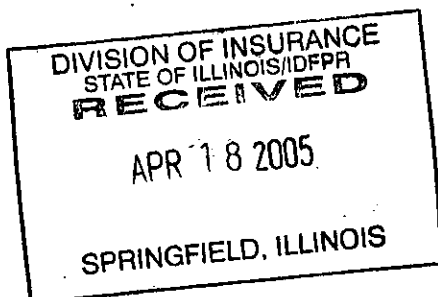
Brief description of filing. (If filing follows rates of an advisory organization, specify organization): independent filing to adjust mono line rates and change division SIX  
genr. liab. contractors mod factor

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

Iowa Mutual Insurance Company

Name of Company



Form (RF-3)

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 6.6%

(1) <u>Coverage</u>		(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto	\$ 80,363	6.6%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
Line of Insurance			

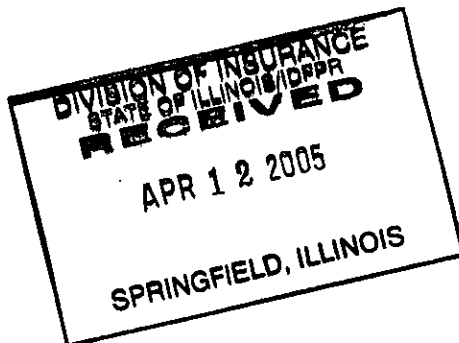
Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Revised Sports Liability Program rates and minimum premiums.

\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will result from application of new rates.



Markel Insurance Company  
Name of Company

*Deidre Balbuena*

Deidre I Balbuena,  
VP Product & Regulatory Services  
Official - Title

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 11/01/2005

(1)	(2)	(3)
Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto	\$77,923	-5.1%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

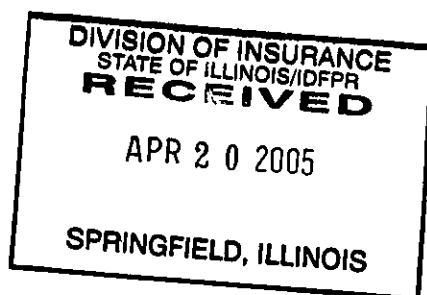
Does filing only apply to certain territory (territories) or certain classes? If so, specify:  
N/A

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):  
Adoption of Illinois General Liability Loss Costs as referenced in ISO Reference Document GL-2005-BGL1.

- \* Adjusted to reflect all prior rate changes.  
 \*\* Change in Company's premium level which will result from application of new rates.

National Interstate Insurance Co.  
 Name of Company

Kathy Koenig,  
Regulatory Compliance Specialist  
 Official - Title



# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

 Change in Company's premium or rate level produced by rate revision effective 11/1/2005

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto	3,906,279	-10.10%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: \_\_\_\_\_

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): \_\_\_\_\_

adoption of ISO filing designation GL-2005-BGL1

\*Adjusted to reflect all prior rate changes.

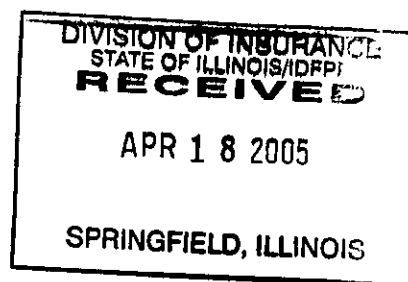
\*\*Change in Company's premium level which will result from application of new rates.

The North River Insurance Company

Name of Company

Ruth A. Overholser, Regulatory Compliance Analyst

Official - Title



SUMMARY SHEET

Change in Company's premium or rate level produced by rate  
revision effective NB: 04/11/05 Ren: 05/17/05.

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial	\$ 164,049	-1.9%
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other _____		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: No

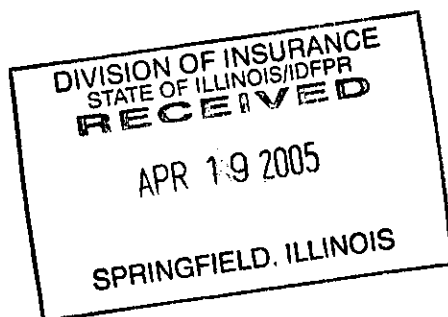
Brief description of filing. (If filing following rates of an advisory organization, specify organization): Rate and Rule Revision, changes listed on coverletter.

\* Adjusted to reflect all prior rate changes.  
\*\* Change in Company's premium level which will result from application of new rates.

Owners Insurance Company  
Name of Company

Emily Schmit, Administrator  
Commercial Prop. & Liab, Actuarial  
Official - Title

30004 (6-77)



## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 7/01/05

	(1)	(2)	(3)
	<u>Coverage</u>	<u>Annual Premium Volume (Illinois)*</u>	<u>Percent Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto	4,730,844	-4.3%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

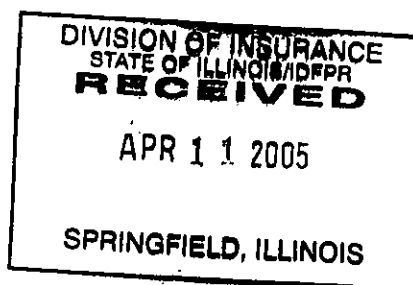
N/A

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Revised our loss cost multipliers.

\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will result from application of new rates.

Selective Insurance Company of  
South CarolinaName of CompanyJudy Symons – State Filings Senior  
AnalystOfficial - Title

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 7/01/05

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto	1,078,060	4.0%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

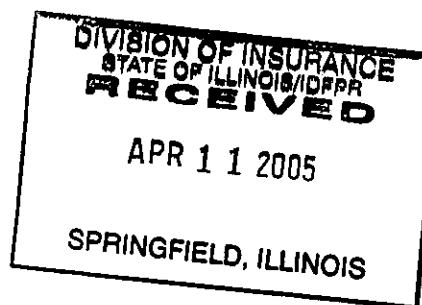
N/A

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Revised our loss cost multipliers.

\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will result from application of new rates.

Selective Insurance Company of  
the Southeast

Name of Company

Judy Symons – State Filings Senior  
Analyst

Official - Title

# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

 Change in Company's premium or rate level produced by rate revision effective 11/1/2005

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto	1,764,787	-10.10%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: \_\_\_\_\_

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): \_\_\_\_\_

adoption of ISO filing designation GL-2005-BGL1

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

United States Fire Insurance Company

Name of Company

Ruth A. Overholser, Regulatory Compliance Analyst

Official - Title

